### FORM D

**UNITED STATES** SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0076

March 31, 1991 Expires:

Estimated average burden

hours per response . . . 16.00



# FORM D

THOMSON

NOTICE OF SALE OF SECURITIES INANCIAL PURSUANT TO REGULATION D, **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION

	SEC USI	E ONLY	
Prefix			Serial
	1		
D.	ATE RE	CEIVE	)

Name of Offering (☐ check if this	is an amendment and name has change	ed, and indicate ch	ange.)Hudson Technolog	gies, Inc.	of h
D. 1- 504	PDula 506 PCastion 4/	6) DULOE	Filing Ur	nder (Check box(es) th	at apply):
□Rule 504 □Rule 505	■Rule 506 □Section 4(	o) LULUE		NAV 1 6	21/1/2
Type of Filing:	ew Filing	NTIFICATION	DATA	IVUVIS	WW
1. Enter the information requested		MIFICATION	DATA		· į
	an amendment and name has changed,	and indicate chang	e Hudson Technologies	Inc	10001
Name of issue ( cheek if this is	an amendment and name has changed,	and moreate chang	c.)IIIdd30II I cciiii0i0gic3	, 1110.	المؤخاطة ها
Address of Executive Offices (Nu Middletown Road, Pearl River, N	imber and Street, City, State and Zip C IY 10956	ode)275 North	Telephone Nun 6000	nber (including Area C	Code) 845-753-
Address of Principal Business Or different from Executive Offices)	erations (Number and Street, City, States) SAME	e and Zip Code) (i	f Telephone Nun	nber (including Area C	Code) SAME
problems within the refr:	ne Company is a refrigerant s igeration industry. The Comp ing, industrial processing an	any's product:	s and services are	ative solutions t primarily used i	o recurring
Type of Business Organization					
corporation	☐ limited partnership, already	formed		'	
			☐ other (please specify	)	
☐ business trust	☐ limited partnership, to be for				
	Month	Year			
Actual or Estimated Date of Incorp	oration or Organization:1	1991	■ Actual	□ Estimated	
Jurisdiction of Incorporation or Org	ganization: (Enter two-letter U.S. Posta			Y	
	CN for Canada; FN for other	r foreign jurisdicti	on)		

### **GENERAL INSTRUCTIONS**

Who must File: All issuers making an offering of securities in reliance on an exemption under Regulation D. or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to file: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to file: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed. Any signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes form the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

**ATTENTION** 

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss on an available state exemption unless such exemption is predicated on the filing of a federal notice.

	<del> </del>			A. BASI	C IDENTIFICATION I	DATE		
2. Enti	Each Each of ea Each	n promoter of beneficial quity securion executive	of the issu owner ha ties of the officer an	ving the power to vote issuer;	issuers and of corporate	vote or dispos	ition of, 10% or more of a or more of anaging partners of partnership issuers;	
Check Box(es	) that Appl	y: □Pro	omoter	☐Beneficial Owner	XExecutive Officer	XDirector	☐General and/or Managing Partner	<u> </u>
Full Name (La	ast name fir	rst, if indivi	dual)Zugi	be, Kevin				
Business or Ro 10965	esidence A	ddress (Nu	ımber and	Street, City, State, Zip	Code)c/o Hudson Techr	nologies, Inc., 2	275 North Middletown Road, Pearl Riv	ver, NY
Check Box(es	) that Appl	y: □Pro	omoter	☐Beneficial Owner	XExecutive Officer	Director	☐General and/or Managing Partner	· · ·
Full Name (La	ast name fir	st, if indivi	dual)Gafa	rian, Neil				
Business or R NY 10965	esidence A	address (N	umber an	d Street, City, State, Z	ip Code) c/o Hudson Te	chnologies, In-	c., 275 North Middletown Road, Pearl	l River,
Check Box(es	) that Appl	y: □Pro	omoter	☐Beneficial Owner	XExecutive Officer	Director	☐General and/or Managing Partner	
Full Name (La	ast name fi	rst, if indivi	dual Man	dracchia, Stephen				<del></del>
Business or R NY 10965	esidence A	ddress (N	umber an	d Street, City, State, Z	ip Code) c/o Hudson Te	chnologies, In-	c., 275 North Middletown Road, Pearl	l River,
Check Box(es	) that Appl	y: □Pro	omoter	☐Beneficial Owner	XExecutive Officer	□Director	☐General and/or Managing Partner	r
Full Name (La	ast name fi	rst, if indivi	dual)Cole	man, Brian				z
Business or R NY 10965	esidence A	Address (N	umber an	d Street, City, State, Z	ip Code) c/o Hudson Te	chnologies, In-	e., 275 North Middletown Road, Pearl	l River,
Check Box(es	) that Appl	y: □Pro	omoter	☐Beneficial Owner	Executive Officer	XDirector	☐General and/or Managing Partner	r
Full Name (La	ast name fi	rst, if indivi	dual)Sche	ll, Harry				
Business or R NY 10965	esidence A	ddress (N	umber an	d Street, City, State, Z	ip Code) c/o Hudson Te	chnologies, Inc	c., 275 North Middletown Road, Pearl	l River,
Check Box(es	) that Appl	y: □Pro	omoter	☐Beneficial Owner	☐Executive Officer	XDirector	☐General and/or Managing Partne	er
Full Name (La Zech, Robert	ast name fir	rst, if indivi	dual)					
Business or R NY 10965	esidence A	ddress (N	umber an	d Street, City, State, Z	ip Code) c/o Hudson Te	chnologies, Inc	c., 275 North Middletown Road, Pearl	l River,
Check Box(es	) that Appl	y: □Pro	omoter	XBeneficial Owner	□Executive Officer	Director	General and/or Managing Partner	<del> </del>
Full Name (La	ast name fir	rst, if indivi	dual)Flen	ning Funds				
Business or R NY 10965	esidence A	ddress (N	umber an	d Street, City, State, Z	ip Code) c/o Hudson Te	chnologies, Inc	c., 275 North Middletown Road, Pearl	River,

Full Name (Last name first, if individual)Monetta, Dominic

□Promoter

Business or Residence Address (Number and Street, City, State, Zip Code) c/o Hudson Technologies, Inc., 275 North Middletown Road, Pearl River, NY 10965

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

☐Executive Officer

XDirector

☐General and/or Managing Partner

☐Beneficial Owner

Check Box(es) that Apply:

### A. BASIC IDENTIFICATION DATE

- 2. Enter the information requested for the following:
  - Each promoter of the issuer, if the issuer has been organized within the past five years;
  - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a or more of a class of equity securities of the issuer;
  - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

Each ge	neral and manag	ing partner of partnership	o issuers.		
Check Box(es) that Apply:	□Promoter	☐Beneficial Owner	□Executive Officer	Director	☐General and/or Managing Partner
Full Name (Last name first,	f individual) Ab	batecola, Vincent			<del></del>
Business or Residence Addre River, New York 10965	ess (Number and	Street, City, State, Zip	Code) c/o Hudson Techn	ologies, Inc., 27	75 North Middletown Road, Pearl
Check Box(es) that Apply:	□Promoter	□Beneficial Owner	☐Executive Officer	☑Director	General and/or  Managing Partner
Full Name (Last name first,	f individual) Bu	rr, Robert		, , , , , , , , , , , , , , , , , , ,	<del>_</del>
Business or Residence Addressiver, New York 10965	ess (Number and	Street, City, State, Zip	Code) c/o Hudson Techn	nologies, Inc., 2	75 North Middletown Road, Pearl
Check Box(es) that Apply:	□Promoter	☐Beneficial Owner	□Executive Officer	<b>⊠</b> Director	☐General and/or Managing Partner
Full Name (Last name first,	if individual) Mo	orch, Otto			<u>_</u>
Business or Residence Addr River, New York 10965	ess (Number and	d Street, City, State, Zip	Code) c/o Hudson Techn	ologies, Inc., 2	75 North Middletown Road, Pearl
Check Box(es) that Apply:	□Promoter	☐Beneficial Owner	☐Executive Officer	□Director	□General and/or Managing Partner
Full Name (Last name first,	if individual)				_
Business or Residence Addr	ess (Number and	d Street, City, State, Zip	Code)		
Check Box(es) that Apply:	□Promoter	☐Beneficial Owner	□Executive Officer	□Director	□General and/or Managing Partner
Full Name (Last name first,	if individual)			· · · · · · · · · · · · · · · · · · ·	<del></del>
Business or Residence Addr	ess (Number and	d Street, City, State, Zip	Code)		· · ·
Check Box(es) that Apply:	□Promoter	☐Beneficial Owner	□Executive Officer	□Director	□General and/or Managing Partner
Full Name (Last name first,	if individual)				<del></del>
Business or Residence Addr	ess (Number an	d Street, City, State, Zip	Code)		
Check Box(es) that Apply:	□Promoter	☐Beneficial Owner	☐Executive Officer	Director	□General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Adda	ess (Number an	d Street, City, State, Zip	Code)		
	(Use hi	ank sheet or conv and i	ise additional copies of t	his sheet as ne	cessarv

				В. І	NFORMA	TION ABO	UT OFFER	ANG				
1 Has t	he issuer so	old, or does t	he issuer int	end to sell, to	o non-accred	lited investo	rs in this off	ering?				Yes No
1, 1145		, , , , ,	are issuer inc		so in Append			-		•••••	••••••	
2. What	t is the mini	mum invect	ment that wi			·	,					X\$50,000
				-	ınit?							Vec No
					who has b							
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Full Name	e (Last nam	e first, if ind	ividual)		<del></del>							
Business	or Residenc	e Address (	Number and	Street, City	, State, Zip C	Code)						<del></del>
Name of A	Associated I	Broker or De	ealer	**********								
States in \	Which Perso	on Listed Ha	s Solicited o	r Intends to	Solicit Purch	asers						
(Check "A	All States" o	r check indi	vidual States	s)								□ All States
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[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
P. 11 37	e (Last nam	e first, if ind	ividual)							·		
ruii Name	- (	,										
	·		·	Street, City,	State, Zip C	Code)	· · · · · · · · · · · · · · · · · · ·				<del></del>	
Business of	or Residenc	e Address (	Number and	Street, City,	, State, Zip C	Code)						
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_	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF	PROCEEDS	
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "O" if answer is "none" or "zero." If the transaction is an exchange offering, check this box   and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		·
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	\$
	Equity	\$	\$
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)	\$	<b>\$</b>
	Partnership Interests	\$	\$
	Other (Specify 12% Unsecured Promissory Notes)	\$850,000	\$410,000
	Total	\$850,000	\$410,000
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and no-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of this purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0 if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchasers
	Accredited Investors	2	\$ <u>410,000</u>
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 3, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		5.11
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		.     \$
	Total		\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not know, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees	•••••	🗆 \$
	Printing and Engraving Costs		X \$10 000

Other Expenses (identify) \_\_\_\_\_ \$\_\_\_

		MBER OF INVESTORS, EXPENSES AND U		
	b. Enter the difference between the aggregate Part C - Question 4.1. This difference is the "ad	offering price given in response to Part C - Quest justed gross proceeds to the issuer."	tion I and total expenses furn	nished in response to
	Indicate below the amount of the adjusted gross for any purpose is not known, furnish an estim adjusted gross proceeds to the issuer set forth in	proceeds to the issuer used or proposed to be use ate and check the box to the left of the estimate. response to Part C - Question 4.b above.	ed for each of the purposes si The total of the payments	hown. If the amount listed must equal the
			Payments to Officers, Directors & Affiliates	Payments To Others
	Salaries and fees		🗆 \$	🗆 \$
	Purchase of real estate		🗆 \$	🗆 \$
	Purchase, rental or leasing and installation of ma	chinery and equipment	🗆 \$	_ 🗆 \$
	Construction or leasing of plant buildings and fa	cilities	S	\$
	Acquisition of other businesses (including the va that may be used in exchange for the assets or se	alue of securities involved in this offering curities of another issuer pursuant to a merger)	🗆 \$	_ 🗆 \$
	Repayment of indebtedness		D \$	□ \$
	Working capital		🗆 \$	\$ \$ 800 00
	Other (specify)		□ \$	_ 🗆 \$
			 	_ 🗆 \$
	Column Totals	, r.*	🗆 \$	<u>k</u> s <u>&amp;w</u> oa
	Total Payments Listed (column totals added)		DQ \$_	800,000
		D. FEDERAL SIGNATURE		
nstit	suer has duly caused this notice to be signed by the rutes an undertaking by the issuer to furnish to the ned by the issuer to any non-accredited investor purs	e U.S. Securities and Exchange Commission, u	e is filed under Rule 505, the pon written request of its st	e following signature taff, the information
Issue	er (Print or Type)Hudson Technologies, Inc.	Signature	Date ///3/02	
Nam	e of Signer (Print or Type) Kevin J. Zugibe,	Title of Signer (Print or Type) Chairman of	the Board and CEO	
		V		

### ATTENTION

			E. STATE SIG	NATURE			
	1.	~	in 17 CFR 230.252(c), (d), (e)?	, ,,,		•	Yes No □ ⊠
		S	ee Appendix, Column 5, for	state response			
	2.		r hereby undertakes to furnis 39.500) at such times as requ		ator of any state in	which this notice is	filed, a notice
	3.	The undersigned issue the issuer to offerees.	r hereby undertakes to furnis	th to the state administrate	ators, upon written	request, information	ı furnished by
	4.	Uniform limited Offer	er represents, that the issuer ing Exemption (ULOE) of the exemption has the burden of	ne state in which this no	otice is filed and u	nderstands that the is	
The issuer has read authorized person.	this noti	fication and knows the	contents to be true and has	duly caused this notice	to be signed on i	ts behalf by the und	ersigned duly
Issuer (Print or Ty	pe) Huds	on Technologies, Inc.	Signature,	1	Date //	1/3/02	
Name of Signer Zugibe	(Print	or Type) Kevin J.	Title of Signer (Print of Ty	be) Chairman of the Boo	ard and CEO /		

Instruction:

## BLANK ROME TENZER GREENBLATT LLP\_

Counselors at Law

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Phone: 212.885.5000 Fax: 212.885.5001

November 14, 2002

New York Department of Law Bureau of Investor Protection and Securities 120 Broadway, 23rd Floor New York, N.Y. 10271

Re: Hudson Technologies, Inc. Form 99

Dear Sir or Madam:

Enclosed herewith, please find an amended Form D as filed with the SEC to supplement the filing of the Form 99 on November 8, 2002.

Sincerely,

Legal Assistant